FEC FORM 3

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FE4AN044

REPORT OF RECEIPTS **AND DISBURSEMENTS**

For An Authorized Committee

3802 ZED SP & 10: #8

Office Use Only

1.	NAME OF	
	COMMITTEE (in	full)

TYPE OR PRINT ▼

Example: If typing, type over the lines

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	WINNITTEE (OT COL)		OV	er the intes.	-						
COMMITTEE TO REELECT TOM FOLEY											
1,253 G STREET SE											
ADDRES	SS (number and street)	WASHI	$I_1H_1G_1T_1O_1N_1$	<u> </u>	<u>.</u>						
'n	Check if different	<u></u>									
ш	than previously reported. (ACC)			*			20003	003-2202			
2. FE	C IDENTIFICATION N	VUMBER ♥	CITY_			TATE	ZIP CC	DDE ADISTRICT			
	000025	92	3. IS THIS REPORT	(N)	OR .	AMEŃI (A)	;				
4. TY											
(a) Quarterly Reports:			(b) 12-Day PRE	•	. 101 1110.			NAME OF TAXABLE PARTY.			
	April 15 Quarterly	Report (Q1)		Primary (12P)		General (1		Runoff (12R)			
	July 15 Quarterly	Report (Q2)		Convention (1)	2C)	Special (1	2S)				
ĺ	October 15 Quart	erly Report (Q3)	Election on	M M /	0 0 /	**************************************	in the State	. # 1			
I	January 31 Year-E	End Report (YE)	(c) 30-Day POS	T-Election Repo	ort for the:		• · · · · ·				
				General (30G)		Runoff (30	OR)	Special (30S)			
I	Termination Repor	rt (TER)	Election on	M M	0 D /	A A A A	in the State				
5. Co	vering Period	4 67	1 005	through	0.6	13D1	2005				
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer											
	re of Treasurer		r S. Fa	LE Y	De	te OC	1 19	à.ŏ.ŏ.š			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.											
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